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2144

PTO/SB/21 (09-04)

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TRANSMITTAL FORM (to be used for all correspondence after initial filing)		Application Number	10/055,597
		Filing Date	1/22/2002
		First Named Inventor	Joel D. Peshkin
		Group Art Unit	2144
		Examiner Name	Vaughn Jr., William C.
Total Number of Pages in This Submission	2	Attorney Docket Number	131724-1011

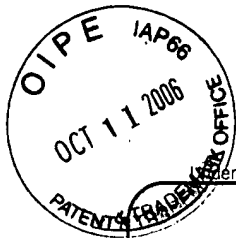
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SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT	
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Signature	
Date	October 11, 2006

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PTO/SB/82 (04-05)

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CHANGE OF CORRESPONDENCE ADDRESS**

Application Number	10/055,597
Filing Date	01/22/2002
First Named Inventor	Joel D. Peshkin
Art Unit	2144
Examiner Name	Vaughn Jr., William C.
Attorney Docket Number	131724-1011

I hereby revoke all previous powers of attorney given in the above-identified application.☐ A Power of Attorney is submitted herewith.**OR**☒ I hereby appoint the practitioners associated with the Customer Number: 32914☒ Please change the correspondence address for the above-identified application to:☒ The address associated with
Customer Number:32914**OR**

<input type="checkbox"/> Firm or Individual Name	Michael A. Rahman				
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I am the:

☐ Applicant/Inventor.☒ Assignee of record of the entire interest. See 37 CFR 3.71.
*Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)***SIGNATURE of Applicant or Assignee of Record**

Signature			
Name	Keith Kind, Chief Intellectual Property Counsel		
Date	10-3-06	Telephone	949-579-3291

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

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